IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Customer Number: 25944

Attorney Docket No.: 118886

Date: March 4, 2004

MAIL STOP PATENT APPLICATION

NONPROVISIONAL APPLICATION TRANSMITTAL **RULE §1.53(b)**

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. §1.53(b) is the nonprovisional patent application

For (Title):

COMMUNICATION SYSTEM, AND ENDPOINT DEVICE AND INTERROGATOR

By (Inventors):

Tskuya NAGAI, Tsuyoshi OHASHI

\boxtimes	Formal drawings (Figs. 1-35; 35 sheets) are attached. Use Figure for front page of Publication.
M	A Declaration and Power of Attorney is filed herewith.
	This application claims benefit of Provisional Application No filed
_	(A Preliminary Amendment is attached to reflect this claim in the Specification if not already present.)
\boxtimes	This patent application is assigned to BROTHER KOGYO KABUSHIKI KAISHA.
	The executed Assignment is filed herewith.
\boxtimes	An Information Disclosure Statement is filed herewith.
	Entitlement to small entity status is hereby asserted.
	A Preliminary Amendment is filed herewith.
\square	Priority of foreign applications No. 2003-111100 filed April 16, 2003 in Japan, No. 2003-095434 filed March 31, 2003
_	in Japan and No. 2003-059851 filed March 6, 2003 in Japan are claimed (35 U.S.C. §119).
	A certified copy of the above corresponding foreign application(s) is filed herewith.
	This application is NOT to be published under 35 U.S.C. 122(b). The undersigned attorney or agent hereby certifies that

tifies that the invention disclosed in this application has not and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication of applications 18 months after filing.

冈 The filing fee is calculated below:

CLAIMS IN THE APPLICATION AFTER ENTRY OF ANY PRELIMINARY AMENDMENT NOTED ABOVE

	FOR:	NO. FILED	NO. EXTRA	
	BASIC FEE		n (- 1521 d 21 (41	
,	TOTAL CLAIMS	44 - 20	= 24*	
	INDEP CLAIMS	10 - 3	= 7*	
☐ MULTIPLE DEPENDENT CLAIMS PRESENTED				

^{*} If the difference is less than zero, enter "0".

SMALL ENTITY				
RATE	FEE	<u>OR</u>		
	\$ 385	<u>OR</u>		
x 9=	\$	<u>OR</u>		
x 43 =	\$	<u>OR</u>		
+ 145 =	\$	<u>OR</u>		
TOTAL	\$	<u>OR</u>		
filing fee is attached. Except as				

OTHER	THAN A
SMALL	ENTITY

770
432
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804

 \boxtimes Check No. 151745 in the amount of \$1804.00 to cover the filing fee is attached. Except as otherwise noted herein, the Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

James A. Oliff Registration No. 27,075

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